

Board of County Commissioners

Sumter County, Florida

910 N. Main Street, Suite 217 • Bushnell, FL 33513-6146 • Phone (352) 569-6042 • FAX: (352) 793-0245
SunCom: 665-0200 • Website <http://sumtercountyfl.gov>



EMPLOYMENT APPLICATION

PLEASE READ THE INFORMATION BELOW BEFORE COMPLETING THIS APPLICATION.

Return completed application to:

Human Resources
910 North Main Street, Suite 217
Bushnell, FL 33513

or

County Administration
The Villages Annex Office
8033 East CR 466
Lady Lake, Florida 32162

1. General Information
 - a. Employment applications may be submitted at anytime.
 - b. Employment applications are active for a period of ninety (90) days from the date of application.
 - c. If you require special accommodation because of a disability to participate in the application/selection process, you must notify the hiring authority in advance.
 - d. We are an Equal Opportunity Employer (EEO). We do not discriminate on the basis of race, ethnicity, religion, color, sex, age, national origin, marital status, veteran's status, disability, or any other legally protected status.
 - e. All information provided is subject to verification. Any misrepresentation, false or incomplete information or omission of facts is cause for rejection of the application or termination of County employment.
 - f. Incomplete applications **may not** be considered for employment.
2. All applications must include the following information:
 - a. Print clearly in ink or type all information.
 - b. The type or title of the position sought.
 - c. Complete contact information.
 - d. Complete dates of employment for each position listed for previous employment.
 - e. Signature of applicant.



EMPLOYMENT APPLICATION

Type or title of the position sought

Date of Application

Last Name

First Name

Middle Initial

Current Residence – Street No. and Name

City

State

Zip code

Mailing Address – If different from above

City

State

Zip code

()
Home Telephone

()
Business Telephone

()
Alternate Telephone

Email Address

Driver's License Number

☐ A ☐ B ☐ C ☐ D ☐ E (regular)
Driver's License Class (Check One)

☐ Yes ☐ No

Has your Driver's License ever been
suspended or revoked?

If yes, please explain

Have you ever been convicted, pled no contest, had adjudication withheld or had prosecution deferred
on any DUI or alcohol related offense? Do you have any charges pending against you or are you
currently enrolled in a pre-trial intervention program related to any DUI or alcohol related offense?
If yes, please explain fully. _____

☐ Yes ☐ No

Have you ever been convicted of a felony or first-degree misdemeanor?
If yes, please explain below.

☐ Yes ☐ No

Have you ever pled nolo contendere or pled guilty to a crime that is a felony or a first-degree
misdemeanor?
If yes, please explain below.

☐ Yes ☐ No

Have you ever had Adjudication of guilt withheld to a crime that is a felony or a first-degree
misdemeanor?
If yes, please explain below.

☐ Yes ☐ No

Have you ever been a defendant in a civil action for intentional tort such as battery or assault?
If yes, please explain the nature of the intentional tort and the disposition of the action below.

☐ Yes ☐ No

A "Yes" answer to the above questions will not automatically bar you from employment. The nature, severity, and date of the offense in relation to the position for which you are applying are considered. If you do not understand any of the above questions, you must ask a representative of Human Resources for clarification.

Education and Training

Did you graduate from high school? ☐ Yes ☐ No

If yes, give name and location.

Name

City/State

Month/Year

If no, do you possess a GED? ☐ Yes ☐ No

If yes, give month/year

Check highest grade
completed:

☐ 8 ☐ 9 ☐ 10 ☐ 11 ☐ 12

High School

☐ 13 ☐ 14 ☐ 15 ☐ 16

College/Trade School

☐ 17 ☐ 18 ☐ 19 ☐ 20

Graduate

Name and Location of College or School

Dates attended

Degree
awarded

Major

Active Professional Licenses/Certificates

Date received

Date expires

Office Skills: Please check areas in which you are competent.

☐ Microsoft Word

☐ Microsoft Access

☐ Dispatch Skills

☐ GIS Applications

☐ Microsoft Excel

☐ Calculator

☐ Fax Machine

☐ Multi-line Telephone

☐ Microsoft Outlook

☐ Copier

☐ Filing

_____ (wpm) Typing

☐ Microsoft PowerPoint

Trade Skills: Please check areas in which you are competent.

☐ Air Conditioning

☐ Groundskeeping

Mechanic:

☐ Painting

☐ Carpentry

☐ Map Reading

☐ Automotive Mech.

☐ Plumbing

☐ Electrical

☐ Masonry

☐ Heavy Equipment Mech.

☐ Read Blueprints

☐ Small Equipment Mech.

☐ Refrigeration

Equipment Skills: Please check areas in which you are competent.

☐ Backhoe

☐ Grade-all

☐ Mower

☐ Tractor

☐ Bulldozer

☐ Grader

☐ Power Mower

☐ Other (please explain)

☐ Chainsaw

☐ Loader

☐ Power Tools

Are you legally allowed to work in the United States? ☐ Yes ☐ No

Do you have adequate transportation to and from work? ☐ Yes ☐ No

Are you related to an Employee or Elected Official of the County? ☐ Yes ☐ No

If Yes, please give the name(s) and relationship of the employee(s)/official(s).

Employment Record

List all Jobs held in the last TEN years.

Start with your present or most recent position and work back. Be specific. Please make every effort to complete the information requested. Please account for ALL periods of time, including any periods of unemployment. If self-employed, give the company name and list business references. If additional space is needed, please use additional pages.

1. Present or most recent job

From _____ To _____ Hours per week _____ Ending Salary \$ _____ ☐ Hourly ☐ Weekly ☐ Annually
_____/_____/_____/_____
Month/Yr Month/Yr Employer _____
Address _____ City _____ State _____ Zip _____
Telephone # _____ Job Title _____
Supervisor's Name _____ Reason for Leaving _____
May we contact your employer? ☐ Yes ☐ No Specific duties and job tasks performed _____

2. Previous Employer

From _____ To _____ Hours per week _____ Ending Salary \$ _____ ☐ Hourly ☐ Weekly ☐ Annually
_____/_____/_____/_____
Month/Yr Month/Yr Employer _____
Address _____ City _____ State _____ Zip _____
Telephone # _____ Job Title _____
Supervisor's Name _____ Reason for Leaving _____
May we contact your employer? ☐ Yes ☐ No Specific duties and job tasks performed _____

3. Previous Employer

From _____ To _____ Hours per week _____ Ending Salary \$ _____ ☐ Hourly ☐ Weekly ☐ Annually
_____/_____/_____/_____
Month/Yr Month/Yr Employer _____
Address _____ City _____ State _____ Zip _____
Telephone # _____ Job Title _____
Supervisor's Name _____ Reason for Leaving _____
May we contact your employer? ☐ Yes ☐ No Specific duties and job tasks performed _____

4. Previous Employer

From _____ To _____ Hours per week _____ Ending Salary \$ _____ ☐ Hourly ☐ Weekly ☐ Annually

_____/_____/_____
Month/Yr Month/Yr Employer _____

Address _____ City _____ State _____ Zip _____

Telephone # _____ Job Title _____

Supervisor's Name _____ Reason for Leaving _____

May we contact your employer? ☐ Yes ☐ No Specific duties and job tasks performed _____

5. Previous Employer

From _____ To _____ Hours per week _____ Ending Salary \$ _____ ☐ Hourly ☐ Weekly ☐ Annually

_____/_____/_____
Month/Yr Month/Yr Employer _____

Address _____ City _____ State _____ Zip _____

Telephone # _____ Job Title _____

Supervisor's Name _____ Reason for Leaving _____

May we contact your employer? ☐ Yes ☐ No Specific duties and job tasks performed _____

6. Previous Employer

From _____ To _____ Hours per week _____ Ending Salary \$ _____ ☐ Hourly ☐ Weekly ☐ Annually

_____/_____/_____
Month/Yr Month/Yr Employer _____

Address _____ City _____ State _____ Zip _____

Telephone # _____ Job Title _____

Supervisor's Name _____ Reason for Leaving _____

May we contact your employer? ☐ Yes ☐ No Specific duties and job tasks performed _____

Have you ever been terminated or asked to resign from employment? ☐ Yes ☐ No

If yes, please explain the circumstances below.

Do you wish to claim Veteran's preference ☐ Yes ☐ No

If yes, additional documentation will be required, including a DD214 or other official document from the Division of Veteran's Affairs which substantiates your eligibility for Veteran's preference.

Certification:

I understand that applications submitted for county employment are public records. I certify that to the best of my knowledge and belief all of the statements contained herein and on any attachments are true, correct, complete and made in good faith.

I understand that any false, incomplete, or misleading information is grounds for rejection of this application or, if discovered at any time after I am employed, may result in dismissal. By submitting this application or other documents, I agree to conform to the County's policies and I understand that, if hired, my employment and compensation will be for no definite duration and may be terminated, with or without cause, and with or without notice, at any time, at the option of either the County or me.

I authorize an investigation of my statements and information contained in this application for employment as may be necessary in arriving at any employment decision. To the extent possible under the law, I waive any legal requirement to provide notice to me regarding reports or records given or received in accordance with this authorization. Accordingly, all third parties are authorized to disclose any and all information to the County as a prospective employer, and I agree to release all third parties, as well as the County, for any claims arising out of actions taken under these authorizations.

If accepted for employment, I understand that the use of illegal drugs is prohibited, and I agree to submit to drug testing to detect the use of illegal drugs at any time during employment. I understand that any offer of employment is conditional upon satisfactory results of any required drug test or background investigation.

Signature: _____ Date: _____

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NOTICE TO APPLICANT OF INTENT TO OBTAIN BACKGROUND INFORMATION

By this document, the County discloses to you that a consumer report, including an investigative consumer report containing information as to your character, general reputation, personal characteristics and mode of living, may be obtained for employment purposes as part of the pre-employment background investigation and, if hired, at any time during your employment. Should an investigative consumer report be requested, you will have the right to demand a complete and accurate disclosure of the nature and scope of the investigation requested and a written summary of your rights under the Fair Credit Reporting Act. Please sign below to signify receipt of the foregoing disclosure and to authorize Human Resources to obtain such consumer reports as part of the pre-employment background investigation. If hired, this authorization shall remain on file and shall serve as an ongoing authorization for Human Resources to obtain these reports at any time during your employment with the BOCC.

Before we may obtain this information your written authorization is required. You have the right to decline authorization for us to obtain this information. However, we will not consider you for employment if you decline. Please read the release carefully before signing.

WRITTEN AUTHORIZATION TO OBTAIN BACKGROUND INFORMATION

I have read the Notice to Applicant of Intent to obtain Background Information. I understand that I have the right to decline authorization for the Board of Sumter County Commissioners to obtain this information concerning me. I understand this may concern information regarding any public record of any convictions for felonies or first-degree misdemeanors, civil judgments, my driving record and insurability, and/or my character, personal characteristics and general reputation.

Understanding these rights, ☐ I **authorize** release of this information.
☐ I **do not authorize** release of this information.

Signature: _____ **Date:** _____

Name: _____
First Middle Last (Maiden)

Address: _____

City State Zip

Driver's License Number _____

Social Security Number _____

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EEO SURVEY

Although the following information is not mandatory, it is requested to aid the Board of Sumter County Commissioners in its commitment to Equal Employment Opportunities. It is unlawful for an employer to fail or refuse to hire any individuals or deprive any individual of employment opportunities because of race, color, religion, national origin, age, marital status or disability.

A SEX ☐ MALE ☐ FEMALE

B DATE OF BIRTH _____

C RACE (Check One Only)

☐ WHITE ☐ BLACK ☐ HISPANIC ☐ ASIAN/PACIFIC ISLANDER ☐ AMERICAN INDIAN/ALASKAN NATIVE
☐ OTHER (Specify) _____

How did you learn of this job opening?

☐ Newspaper

☐ Job Board

☐ Job Line

☐ Website

☐ Other _____